with chapters on aortoiliac reconstruction and progresses distally to a chapter on infrapopliteal artery bypass. Also included in this section are numerous chapters on endovascular surgical techniques. There is a very well-written chapter on endovascular imaging techniques and another chapter on interventional angiographic techniques.

The fourth portion of the text is entitled "Thrombolysis." This section of the text is very much state-of-the-art. Two of the seven chapters are coauthored by the editor. This portion of the text represents approximately 25% of the total book, obviously reflecting the editor's bias. It is especially well-written and informative. The final portion of the text is entitled "Lower Extremity Venous Disease" and covers the spectrum from venous stasis disease to pulmonary embolism.

Overall, the book is well edited. The title of the textbook, *Lower Extremity Vascular Disease,* provides no clues as to why the book contains chapters on thoracoabdominal aortic aneurysms, juxtarenal abdominal aortic aneurysms, and infrarenal aortic aneurysms. There is also a chapter on endovascular aneurysm repair, mainly discussing aortic repair. It would seem prudent to change the title of this textbook from *Lower Extremity Vascular Disease* to a more inclusive one. In the preface of the text, Dr. Ouriel states that he hopes the text will serve those engaged in developing a basic level of knowledge of vascular disease, as well as those expanding or refreshing their knowledge. I believe the goal is achieved. This book is appropriate for the general surgical resident embarking on a vascular rotation. It also may serve some of the general surgeons who would like to remain current in the treatment of vascular disease.

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Textbook of critical care, 3rd edition

Shoemaker, Ayres, Grenvik, and Holbrook, Philadelphia, 1995, W.B. Saunders, 1892 pages, $115.

The third edition of Dr. Shoemaker's *Textbook of Critical Care* continues the tradition established by the original edition as a reference book of authoritative excellence. This edition includes an impressive list of more than 300 contributors recognized as experts in their given fields of critical care medicine. Among the list are the first three presidents of the Society of Critical Care—including Dr. Shoemaker himself. More than 200 independent chapters arranged in 17 sections cover all aspects of medical, surgical, obstetric, and pediatric critical care.

As a vascular surgeon, I cannot help but be impressed by the comprehensive clinical range that our colleagues in critical care have chosen to include within their domain. The great detail and organization of the textbook are rivaled only by its remarkable thoroughness. The volume of information in this text is enormous. Topics receiving comparable attention range from the fairly typical chapter on the diagnosis and treatment of shock syndrome to subjects as tedious as surfactant physiology. Rather mundane problems such as providing pharmaceutical services in the ICU are coupled with detailed chapters on prostaglandins, leukotrienes, and the regulation of gene expression. From cellular biology through computers in the ICU to medical ethics, the extent to which each author has covered his assigned topic is quite extraordinary. To this end, this text should be considered a complete reference of critical care and probably can best be characterized as a critical care encyclopedia.

However, as is the case with many broad-based textbooks including many in general surgery, topics overlap, and variation in quality is inevitable. Although the text is current, some chapters are holdovers from the second edition, and other chapters, while complete, are confined by their length to a superficial review. For example, the author of "Diagnosis and Therapy of Vascular Diseases" had the formidable task of detailing acute and chronic arterial insufficiency, diseases of the aorta, upper extremity ischemia, cerebrovascular insufficiency, mesenteric arterial insufficiency, complications of vascular surgery, and venous disease, all in less than five pages. Our trauma/critical care surgeons, in helping review this text, observed similar superficialities in the area of critical care monitoring, including deficiencies in discussions of the newer pulmonary artery catheters with end-diastolic volume indices and the newer modes of ventilatory support.

Although this text, for the practicing general surgeon and surgical intensivist, may be deficient in its emphasis of surgical critical care, other textbooks dedicated solely to the practice of surgical critical care do exist. As a practicing vascular surgeon, coping daily with arterial insufficiency in often the most beleaguered medical patient, this textbook will add to my clinical data base, particularly through its wide range and broad scope.

In summary, I congratulate the authors for writing such a comprehensive volume on the practice of critical care medicine. This book will serve as a usable reference resource on anyone's bookshelf.

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Microsurgical carotid endarterectomy

Julian Bailes and Robert Spetzler, Philadelphia, 1996, Lippincott-Raven, 220 pages, $150.

This text of 200 pages contains 10 chapters by the senior editors, neurologic surgeons at Allegheny General Hospital (Pittsburgh) and the Barrow Neurologic Institute (Phoenix), as well as 15 other authors who are neurosurgeons, neuroanesthesiologists, neurologists, and neuroradiologists. Introductory chapters include overviews on the epidemiology and natural history of carotid stenosis, preoperative risk assessment, and patient selection for carotid endarterectomy. The next chapter reviews carotid angiography, magnetic resonance, and magnetic resonance arteriography, followed by chapters describing the anesthetic management during carotid endarterectomy and the operative technique itself, which is beautifully illustrated. The

final chapters in the text discuss the postoperative medical management of the carotid endarterectomy patient and the unique management of total occlusion.

As stated by the authors, the purpose of this text was to "collect the entire spectrum of care associated with microsurgical carotid endarterectomy into one reference volume." Most of the chapters in the text are competent review and overview sections, but do not add new information to previously published texts on the management of the patient with cerebrovascular disease. Indeed, the significance of the 36-page chapter on "Rationale and Protocol for Microsurgical Carotid Endarterectomy" escapes this reviewer. The operative instructions offered are those that have been well described for decades, except the arteriotomy closure is performed with an operating microscope in lieu of loop magnification. The section, however, on perioperative complications including postoperative thrombosis, intracerebral hemorrhage, and controversies in carotid endarterectomy (ie, carotid patch angioplasty, intraoperative shunting) is quite good.

The chapter discussing intraoperative transcranial Doppler (TCD) is well written and well-illustrated. The illustrative case examples of "competent vs incompetent collateral reserves," microembolization, and carotid thrombosis were helpful in understanding TCD as an adjunct for cerebral surveillance during operation.

The most intriguing chapter in the text was on management of total carotid occlusion. The authors reviewed and documented the natural history and operative results of internal carotid artery occlusion and report their results in 42 patients who underwent "emergency carotid endarterectomy for appropriate symptoms." The authors opened 24 arteries with thromboembolectomy, performed internal carotid "stumpectomy" with external carotid ligation in nine, and stumpectomy with external carotid endarterectomy and EC-IC bypass in four. The long-term follow-up results demonstrate an 88% patency rate by color-flow ultrasonography in patients who initially were thrombectomized. The authors conclude that the natural history of carotid occlusion has been ill defined, and the authors believe they have improved their ability to reopen occluded arteries. An algorithm is presented as a management guideline.

In general, this text is beautifully illustrated, well documented, and well written. It does not, however, offer much new about carotid endarterectomy, but would serve as an appropriate reference text.

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